



October, 2016

Montana Prevention Coalition Communication Post

PREVENTION AT WORK IN MONTANA

Boyd Andrew
Management Services

Community Benefit & Prevention by Mackenzie Antila, Prevention Fellow at the Prevention Resource Center

Six months ago my mentor, Vicki Turner, suggested I watch a quick YouTube video on “Community Benefit.” I took that to mean some kind of community organization or symbiotic relationship. Six months later and I still find myself trying to understand community benefit in Montana.

The basics: You may be wondering what community benefit is. I’ve developed a short synopsis after countless hours of YouTube and various presentations. In order for non-profit hospitals to maintain their non-profit federal standards, they are required to have a community benefit plan, and to direct a portion of their income that would be profit into other identified community needs. Montana hospitals generally do this through “charity care,” using community benefit dollars to pay for patient treatment. Currently only a very small portion from some hospitals goes to cash and in-kind contributions to community groups that address those identified community needs.

The situation: Hospitals that do not meet the federal requirement for 30-day readmissions are penalized, and given less money the following year. Readmissions across the U.S. account for \$17 billion in Medicare pending annually, and 2015 saw \$420 million dollars in penalties for Medicare readmissions alone. In 2015, five Montana hospitals were penalized for their 30 day readmission rate. There are some specific patient types highlighted in these readmissions; heart and lung patients, pneumonia and knee replacements. But there is an additional group of patients coming to the forefront, substance abusers. These patients lead in readmissions; drug seeking patients, chronically ill substance abusers and addicts.

The solution: We work to prevent substance abuse. Hospitals need less substance abusers in their hospital beds. Under community benefit requirements non-profit hospitals have money and resources to give. In 2010, the 10 largest hospitals in Montana reported \$166 million in community benefits. Thanks to expanded Medicare, there is less charity care to be done and these resources can shift to primary substance abuse prevention. There is a significant need for funding and acknowledgement of prevention and hospitals can easily address both while simultaneously reducing readmissions and avoiding penalties.

As far as symbiotic relationships go, hospitals and prevention coalitions should make the list. Community benefit action committees generally meet quarterly. Find your local non-profit hospital and get yourself a seat at their table. See what their dollars and resources can do for your coalitions, and what your prevention science can do for them and the entire community.

Our new PFS Prevention Specialist in Dawson County introduced herself to the community by writing an article for her local newspaper —————



As the Dawson County Prevention Specialist at District II Alcohol and Drug, I would like to introduce myself to the community. Recently retiring with over 29 years of service in law enforcement here in Glendive, I have seen firsthand the damages alcohol and drugs have caused to individuals and families within our community.

Social media has recently been abuzz with images of caregivers who have overdosed, while caring for very small children. National news stations have broadcast a YouTube video of a young mother overdosed in Massachusetts in an aisle of a store with her toddler daughter frantically trying to wake her. In Ohio, there is a photo of a toddler boy sitting in the back seat of a car and his grandmother and her boyfriend both slumped over in the front seats from overdoses. It is deeply disturbing to view. Unfortunately, these images are not staged. You can also see throughout local and national news deaths of people under the age of 21 from alcohol poisoning, drinking and driving, and other deaths caused by poor actions due to intoxication.

Despite these grim images, there are reasons to be optimistic. The simple answer to this growing problem is prevention. We as a community can work with due diligence to prevent addictions. We can do this by educating caregivers and the youth in this community about the dangers and consequences of alcohol and drug use at a young age. In 2016, Dawson County High School seniors were asked the question "In your lifetime, on how many occasions have you had alcoholic beverages (beer, wine, or hard liquor) to drink – more than just a few sips". Alarmingly, 76.9% answered they had. (Montana Department of Public Health and Human Services 2016 Montana Prevention Needs Assessment Survey)

District II Alcohol and Drug is known as a treatment program. The counselors work tirelessly to help clients reach sobriety. My goal as the Prevention Specialist is to make it known that District II Alcohol and Drug is also a prevention resource. Please feel free to contact me at 406-377-5942 if I can help in any way to educate or collaborate to help spread the message of the dangers of underage drinking and drug use.

Paula Marx
Prevention Specialist
District II Alcohol and Drug



Chemical Dependency Bureau News

HIGHLY RECOMMEND READING BOTH OF THESE ISSUE REPORTS:

[“FEDERAL PRIORITIES FOR A HEALTHIER AMERICA” – OCT 2016](#)

[HTTP://HEALTHYAMERICANS.ORG/ASSETS/FILES/TFAH-2016-FEDERALPRIORITIES-FINAL.PDF](http://HEALTHYAMERICANS.ORG/ASSETS/FILES/TFAH-2016-FEDERALPRIORITIES-FINAL.PDF)

(CUT & PASTE LINKS INTO YOUR BROWSER)

[“A HEALTHY EARLY CHILDHOOD ACTION PLAN: POLICIES FOR A LIFETIME OF WELL-BEING NOVEMBER 2015 “](#)

[HTTP://HEALTHYAMERICANS.ORG/ASSETS/FILES/TFAH-2015-EARLYCHILDHOODRPT%20FINAL.PDF](http://HEALTHYAMERICANS.ORG/ASSETS/FILES/TFAH-2015-EARLYCHILDHOODRPT%20FINAL.PDF)

OCTOBER 2016-HIGHLIGHTS

In the *Blueprint for a Healthier America 2016: Policy Priorities for the Next Administration and Congress*, TFAH presents key strategies for improving the health of Americans. The report calls for a new approach to health by prioritizing improving health and addressing major epidemics in the United States.

“It’s time for a sea change from our current sick care system to a true health system, where we focus on preventing disease and improving quality of life,” said Richard Hamburg, Interim CEO and President of TFAH. “In the *Blueprint*, we highlight high-impact policies that could help spare millions of Americans from preventable health problems and save billions in avoidable healthcare costs - if we make them a priority.”

The report highlights pressing crises and how investments could yield positive returns on investment by adopting proven health strategies. For instance:

- ◆ **Investing \$1 in substance use prevention to realize as much as \$34 in return.** Deaths from prescription painkiller use have more than quadrupled in the past 15 years and deaths from heroin have tripled since 2010, contributing to higher death rates among middle-aged Whites. Five of the strongest school-based substance use prevention strategies have returns on investment ranging from \$3.8:1 to \$34:1.
- ◆ **Realizing a 7-10 percent annual return by investing in early childhood education.** More than half of U.S. children - across the economic spectrum - experience adverse experiences, such as physical or sexual abuse, and more than 20 percent live below the poverty line, which increases their risk for “toxic stress” - living under a constant state of stressful conditions - that can contribute to a range of physical, mental and behavioral health issues. Investments in early childhood education can help mitigate against impact of these risks and increase resilience, while also providing an annual return of 7 to 10 percent per year, and supportive nurse-family home visits for high-risk families show a return of \$5.70:1.

From the Prevention Resource Center

Two Opportunities for Coalitions to Shine Now from CADCA



October is National Medicine Abuse Awareness Month. CADCA is asking all coalitions to educate their community about the dangers and the solutions related to our nation's medicine abuse epidemic. Coalitions are encouraged to educate about both over-the-counter and prescription drug abuse. CADCA's Dose of Prevention Award recognizes outstanding coalitions each year at the National Leadership Forum and is a great opportunity for nationwide recognition. Please learn more at PreventRxAbuse.org <http://bit.ly/2eCB2ov> #PreventRxAbuse #OTCed



CADCA and its partner the National Institute on Alcohol Abuse and Alcoholism have launched a new awareness project and contest to encourage more alcohol-related facts shared through social media. Coalitions have until November 18 to submit their creative images and memes for the Know More Before You Pour contest. Learn all about it on the CADCA [website](http://www.cadca.org/news/know-more-you-pour-social-media-contest). <http://www.cadca.org/news/know-more-you-pour-social-media-contest> #BeforeYouPour

More From the Prevention Resource Center

CADCA Opportunities for Coalitions in Communications Right Now

Submissions are due by November 18th – prize is a \$1,000. 10 coalitions will be selected.

Details about the contest are here <http://www.cadca.org/news/know-more-you-pour-social-media-contest>

Kenzie wanted to share this new cell phone app: follow this link for the rest of the article below:

<http://news.rutgers.edu/news/new-app-allows-users-post-photos-drug-and-alcohol-practices-their-community/20160928#.WBfLJ8vfMdv>

RUTGERS TODAY

Monday October 31, 2016

Your source for university news



NEWS

New App Allows Users to Post Photos of Drug and Alcohol Practices in Their Community

'Be The One,' developed by Rutgers researchers and the NJ Prevention Network, captures images and collects data to offer an insider's view

Thursday, September 29, 2016

By Aimee LaBrie

A game of beer pong placed besides the game Candy Land in a local drug store. A machine-gun shaped bottle of liquor. A security officer standing guard next to a prescription drug drop-off box in Walgreens. These are a few examples of the dozens of photos taken by local community members using a new mobile app called "Be The One." Prevention specialists hope the app will help paint a picture of the conditions that protect citizens– or put them at risk – for substance abuse.

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The app, developed by researchers at the [Rutgers School of Social Work](#) (SSW) and prevention specialists at the New Jersey Prevention Network, is part of a federal prevention effort known as Partnerships for Success. Funded by the Substance Abuse and Mental Health Services Administration (SAMHSA), the initiative aims to encourage the development of local solutions to addiction issues.

"The photos assist with data collection that helps to identify trends and give researchers a more accurate understanding of where abuse exists among young users," says Kristen Powell Gilmore, principal investigator on the project at the Rutgers School of Social Work who has been working with SSW professor N. Andrew Peterson, to integrate research and environmental prevention practices for more than eight years.

DO IT FOR STEVE!

On an extremely frigid night nearly 12 moons ago, a little orange fur ball showed up on my front porch, stood as tall as it could and stared imploringly through the window. The laws and norms weren't favorable toward felines on the other side of that window but he wouldn't stop yammering away until we opened the door. Just for the night, we agreed, and that's only if the dogs don't eat you while I'm sleeping. Yet the next day it was readily apparent that this gaudy new guy, who soon became known as Steve, was running the show. He wasn't even a cat yet, said the vet later, he was the puppy version of a cat.

Steve's initial persistence led to him to becoming a most valued member of the community he changed. He was always vocal, sometimes kind and occasionally an irascible rascal. Squeaky Steve was also prone to high risk behavior, including playing chicken on Interstate 15. Sadly, that's where we found him. In times like these I am reminded of the Dostoevsky quote: "There is only one thing that I dread: not to be worthy of my sufferings."

That also happened to be a favorite quote of Victor Frankel, the holocaust survivor and founder of logotherapy, a form of existential analysis. Much of logotherapy can be boiled down to this one observation of his: "Everything can be taken from a human but one thing: the last of the human freedoms—to choose one's attitude in any given set of circumstances, to choose one's own way." We're all a sort of brief orange flash in this universe, it's good to be reminded of that so we can do what we can to make it brighter for those around us.

